PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number 10/790823
HITA.0523

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
		· .	(Column 1)		(Column 2)		1.	TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			19 .			· .		RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		•	BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			/ 9 minus 20=		• 20			XS 9=		OR	XS18=	
INDEPENDENT CLAIMS			3 minus 3 =		10		·	X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT							· [+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II											OTHER	THAN
	<u>a</u>	(Column 1)	(Column 2)			(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 19	Minus	- a	0			X\$ 9=		OR	X\$18=	
	Independent	• 3	Minus		3	-		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	J
(Column 1)(Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING		HIGHE	_	PRESENT	١٢		ADDI-			ADDI-
	•	AFTER AMENDMENT		PREVIO PAID F	USLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	•	Minus	**	·	=		X\$ 9=		OR	X\$18=	
	Independent	NTATION OF MU	Minus	FAIDENE	CL AINA	<u> </u>		X43= ·	•	OR	X86=	
	PIRST PRESE	NIATION OF MC	LIPLE DEP	ENDENT	CLAIM	<u></u>	' [+145=.		ÓR	+290=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C	`	CLAIMS REMAINING AFTER AMENDMENT	·	. HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***			+	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			υ π		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		ber Previously Paid					foun	d in the app	ropriate box	in col	ມ ກາກ 1. · .	